STATE OF ARIZONA



Write-in Candidate NOMINATION PAPER AFFIDAVIT OF QUALIFICATION CAMPAIGN FINANCE LAWS STATEMENT [A.R.S. §§ 16-311, 16-312, 16-905(K)(5)]

FOR OFFICE USE ONLY

You are hereby notified that I, the undersigned, a qu	ialified elector, am a candidate for the	office of
the	Party (if applicable) to be vote	
the PRIMARY or GENERAL (circle one) election to be held on		
I will have been a citizen of the United States for	year(s) next preceding my election	and will
have been a citizen of Arizona for year(s) next precede	ding my election and that my age is	,
and my date of birth is the day of	, 19, and have re	esided in
	County for year(s)	and in
precinct	for year(s) before my election	
I do solemnly swear (or affirm) that at the time of	filing, I am a resident of the county, d	listrict or
precinct which I propose to represent, and as to all other of	qualifications, I will be qualified at the	time of
election to hold the office that I seek, having fulfilled the const	itutional and statutory requirements for	r holding
said office.		
Actual residence address or description of place of residence	(city or town)	(zip)
Post office address		
	(city or town)	(zip)
Print or type your name on the following line as you wish it to be listed		
on the Notice of Official Write-In Candidates.		
LAST NAME	FIRST NAME	
	AIDID ATE GIONATURE	
CAI	NDIDATE SIGNATURE	
Subscribed AND SWORN to (or affirmed) before me this	day of20_	
Not	tary Public	
My Commission Exp	oires:	
(Seal) I have read all applicable laws relating to campaign financing a		
	. •	
	NDIDATE SIGNATURE	

Office Revision 9/30/2002